Legal Department, DL429 Intellectual Property Administration P. O. Box 7599 PATENT APPLICATION

ATTORNEY	DOCKET	NO.	
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10990978-1

Loveland, Colorado 80537-0599

IN THE

UNITED STATES PATENT AND TRADEMARK OFFICE

nventor(s): Todd D. Alleckson

Serial No.: 09/290,149

Examiner: Samuel Rimell

Filing Date: April 12, 1999

Group Art Unit: 2175

Title:

Sir:

Data Management Center For Patient Monitoring

RECEIVED

COMMISSIONER FOR PATENTS

PO Box 1450

Alexandria, VA 22313-1450

MAY 0 5 2003

Technology Center 2100

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Response	e/Amendment as calculated belov	N .	() Pe	etition ipplen	nenta	xtend ti al Decla		respor
	onal fee (Addres		e to "Box Non-Fee An		ents) ——-	([*]	fee \$		
	CLA	MS AS AME	NDED BY OTHER THAN A	SMALL	ENTIT	Y			
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5 PRES EXT	ENT	(6) RATE		(7) ADDITIONAL FEES	
TOTAL CLAIMS	28	MINUS	28	=	0	×	\$18	\$	C
INDEP CLAIMS	4	MINUS	4	=	0	X.	\$84	\$	(
[] FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM						+	\$280	\$	(
EXTENSION FEE	1ST MONTH		MONTH 3RD MO 10.00 \$930.0			450.0		\$	(
		<u> </u>				OTHER	RFEES	\$	

Charge \$ 0 to Deposit Account 50-1078. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 50-1078 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 50-1078 under 37 CFR 1.16, 1.17, 1.19, 1.20 and 1.21. A duplicate copy of this sheet is enclosed.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450.

Date of Deposit:

Typed Name:

Signature:_____

Respectfully submitted,

TOTAL ADDITIONAL FEE FOR THIS AMENDMENT

Todd D. Alleckson

Raymond Van Dyke

Attorney/Agent for Applicant(s)

Reg. No. 34,746

Date: May 2, 2003